

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHFR020060 US

	J2201010.5	20 Julio 2002	ILU
COUNTRY	APPLICATION NUMBER 02291578.9	DATE OF FILING DAY, MONTH, YEAR 25 june 2002	PRIORITY CLAIMED UNDER 35 USC 119 YES
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I acknowledge the duty to disc Title 37, Code of Federal Reg		erial to the examination of this appli	cation in accordance with
I hereby state that I have revictlaims, as amended by any a		tents of the above-identified specific	ation, including the
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is attached hereto.			
plural names are listed below) of the subject matter which is reading codes with interfere	name is listed below) or an original claimed and for which a patent is since-free windows	
My residence, post office add	ress and citizenship are as sta	ated next to my name.	
As a below named inventor, I	hereby declare that:		

		n For Patent Application and P	ower of Attorney (Continued)		Attorneys Docket Number
<u> </u>	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact				
all busi	iness in the Patent a	Y: As a named inventor, I hereby appoind Trademark Office connected there	oint the following attorney(s) and/or a with. (List name and registration num	igent(s) to prose	cute this application and transact
Jack	E. Haken, Reg.	No. 26,902		Direct Telephone	
	ael E. Marion, R			name and teleph 914)332-022	
Edwa	FULL NAME OF	Reg. No. 30,245 FAMILY NAME	FIRST GIVEN NAME		ECOND GIVEN NAME
	INVENTOR	BRAJAL	Americo	١	EGGNS GIVEN IVANIE
201	RESIDENCE &	OUT /	OTATE OF FOREIGN COUNT	RY C	OUNTRY OF CITIZENSHIP
0	CITIZENSHIP	Villeneuve Le Roi		F	Portuguese
700	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	I	TATE & ZIP CODE/COUNTRY
	ADDITEGO	54, rue Jean-Jacques	F-94290 Villeneuve	Le Roi F	rance
	FULL NAME OF	Rousseau FAMILY NAME	FIRST GIVEN NAME		ECOND GIVEN NAME
0	INVENTOR	UNAL SAYRAC	Berna	l °	ECOND GIVEN NAME
02	RESIDENCE &	CITY	STATE OR FOREIGN COUNT	RY C	OUNTRY OF CITIZENSHIP
	CITIZENSHIP	Paris HX	France		Turk
	POST OFFICE	POST OFFICE ADDRESS	CITY	_	TATE & ZIP CODE/COUNTRY
	ADDRESS	89 bis rue Blomet	F-75015 Paris	F	rance
8	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	s	ECOND GIVEN NAME
- I	INVENTOR	LAUER	Ludovic		
.03	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNT		COUNTRY OF CITIZENSHIP
	OTTZENSTIF	Paris HX	France	F	rance
	POST OFFICE	POST OFFICE ADDRESS	CITY		TATE & ZIP CODE/COUNTRY
	ADDRESS	17, rue Fontaine au Ro	i F-75011 Paris	F	rance
7	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	S	ECOND GIVEN NAME
	INVENTOR	MORLIER	<u>Céline</u>		
204	RESIDENCE & CITIZENSHIP	CITY -W/Y	STATE OR FOREIGN COUNT		COUNTRY OF CITIZENSHIP
	POST OFFICE	Paris POST OFFICE ADDRESS	France		STATE & ZIP CODE/COUNTRY
	ADDRESS	126 rue Lecourbe	F-75015 Paris		France
heret	ov declare that all st	atamenta mada barain of my ayan kan			
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U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

DATE 5 November 2004

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I hereby state that I have review claims, as amended by any am I acknowledge the duty to disclatile 37, Code of Federal Regu	nendment referred to above. ose information which is mate lations, § 1.56(a).	·	plication in accordance with
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I hereby state that I have review claims, as amended by any am	nendment referred to above. ose information which is mate	·	green.
I hereby state that I have review		ents of the above-identified speci	fication, including the
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and was amended under PCT	Article 19		
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 Number <u> </u>	• •		
★ was filed as PCT internation	nal application		
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was filed as United States a	pplication		
is attached hereto.			
plural names are listed below) of entitled: MT-CDMA using spreathe specification of which (check	of the subject matter which is e eading codes with interferen	claimed and for which a patent is	s sought on the invention
believe I am the original, first a	and sole inventor (if only one r	name is listed below) or an origin	nal first and joint inventor (if
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
As a below named inventor, I h	ereby declare that:		
			PHFR020060 US
e a	nal Applications)	AND POWER OF ATTORNEY	ATTORNEY'S DOCKET NUMBER

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (includes Reference to PCT International Applications) PHFR020060 US POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Direct Telephone Calls to: Jack E. Haken, Reg. No. 26,902 (name and telephone number) Michael E. Marion, Reg. No. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 **FULL NAME OF** FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME **INVENTOR BRAJAL** Americo RESIDENCE & CITY STATE OR FOREIGN COUNTRY 201 COUNTRY OF CITIZENSHIP **CITIZENSHIP** Villeneuve Le Roi France **Portuguese** POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY **ADDRESS** 54, rue Jean-Jacques F-94290 Villeneuve Le Roi France Rousseau **FULL NAME OF** FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME **INVENTOR UNAL SAYRAC** Berna **RESIDENCE &** STATE OR FOREIGN COUNTRY 202 CITY COUNTRY OF CITIZENSHIP CITIZENSHIP **Paris** France Turk POST OFFICE POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY CITY **ADDRESS** 89 bis rue Blomet F-75015 Paris France **FULL NAME OF** FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME INVENTOR LAUER Ludovic **RESIDENCE &** CITY STATE OR FOREIGN COUNTRY 203 COUNTRY OF CITIZENSHIP CITIZENSHIP **Paris** France France POST OFFICE ADDRESS POST OFFICE STATE & ZIP CODE/COUNTRY **ADDRESS** 17, rue Fontaine au Roi F-75011 Paris France 17 113 FULL NAME OF FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME **INVENTOR** MORLIER MORLI Céline **RESIDENCE &** 204 CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP **France Paris** France Par 5 POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY **ADDRESS** 126 rue Lecourbe F-75015 Paris France I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 203

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SIGNATURE OF INVENTOR 204

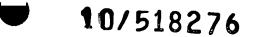
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I her	eby appoint:		
	Practitioners associated with the Customer Number:	24737	
<u> </u>	DR		
	Practitioner(s) named below (if more than ten patent practition	ers are to be named, then a custom	ner number must be used):
	Name	Registration	on Number
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}			
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as atto	mey(s) or agent(s) to represent the undersigned before the Unided all patent applications assigned only to the undersigned associated to the undersigned to the undersigned to the undersigned to the undersigned before the Unit of the undersigned to the undersi	ted States Patent and Trademark (Office (USPTO) in connection with
attache	d all patent applications assigned only to the undersigned according to the undersigned according to this form in accordance with 37 CFR 3.73(b).	rding to the USPTO assignment re	cords or assignment documents
	· · · · · · · · · · · · · · · · · · ·		
Assigi	nee Name and Address:		
K	oninklijke Philips Electronics N.V.	•	
G	roenewoudseweg 1		
5	621 BA Eindhoven, The Netherlands		
			,
A	a stable formula		
requir	y of this form, together with a statement under	37 CFR 3.73(b) (Form PTO	/SB/96 or equivalent) is
	ed to be filed in each application in which this fee completed by one of the practitioners appointized to act on behalf of the proclames and		
	" w wy yn bellall yl llie akkinnen ann mile	identify the application in	which this Power of
Attorn	of total be filed.		
	SIGNATURE of As The individual whose signature and title is supplied	signee of Record below is authorized to act on beha	ılf of the assignee
Name	Matthieu van Kapp		
Signatur	· Main	Date	Amilla End
Title	Authorized Representative	Telephone	14 mil 2g 2004 (914) 333-9600
This collec	ction of information is required by 37 (54) 1.31 and 1.33. The information	00 is required to obtain as sales a bount	,

USPTO to process) an application. Confidentiality is governed by 37 tept 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEME	NT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Electronics N	.V.
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently
Entitled: MT-CDMA USING SPREADING CODES WITH	I INTERFERENCE-FREE WINDOWS
Koninklijke Philips Electronics N.V. (Name of Assignee)	a <u>corporation</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. the assignee of the entire right, title, and interest	t; or
2. an assignee of less than the entire right, title and The extent (by percentage) of its ownership inte in the patent application/patent identified above by virte	rest is %
A. [] An assignment from the inventor(s) of the paten in the United States Patent and Trademark Office attached.	t application/patent identified above. The assignment was recorded e at Reel, Frame, or for which a copy thereof is
OR	
B. [] A chain of title from the inventor(s), of the patent below:	application/patent identified above, to the current assignee as shown
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[] Copies of assignments or other documents in the c [NOTE: A separate copy (i.e., the original assignments be submitted to Assignment Division in accordance or recorded in the records of the USPTO. See MPEP	ent document or a true copy of the original document) rdance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below) is auth	_
	Aaron Waxler, Reg. 48,027
Date (914) 333-9608	Typed or printed name/
	- / / / / / / / / / / / / / / / / / / /
Telephone number	& Signature
	Corporate Counsel Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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